it as a hysterical symptom, Raecke thought it to be merely a stigma of hysteria, Nissl as katatonic negativism, while more recently Henneberg (Ueber das Gansersche Symptom.—Allg. Zeit. f. Psychiatrie. Bd. LXI, H. 5, 1904), in a record of thirteen cases showing absurd replies found that the syndrome occurred not only in hysterical stupor and dreamy states, but also in manic conditions, melancholia and dementia præcox. The most striking thing is the absolute absurdity of the replies, even to the most simple questions, the names of familiar objects or in simple calculation. The patient listens attentively, understands the question, tries hard to give a correct answer, but in spite of himself the replies astonish us by their absurdity. A few details of a case from Henneberg's series (Case 13), may perhaps serve to make this more clear. How many legs has a dog? "Five legs." A horse? "Also five." A crow? "I have not seen any." A sparrow? "It has also four feet." 2×2?="5." 2×2?="6." 2×5?="8."

Soukhanoff has given a very excellent résumé of the entire question (Sur la Syndrome de Ganser ou de Symptomo-Complexus des Reponses Absurdes, Rev. Neurol., Ann. XII, No. 17. Sept. 15, 1904). According to him, this syndrome differs from cases of mental confusion, where the replies are absurd, in that they are few in number. He believes it to be part of the category of hysterical disorders, but believes it may also accompany dementia præcox. Cases which show the syndrome do not terminate by recovery, but evolve towards a psychic state of doubtful prognosis, not necessarily deterioration, as no case of hysteria deteriorates. It is an associational disorder, and when the patient starts to reply, ideas of another order suddenly surge up in his consciousness. In hysterical paralysis, one often observes a loss of function of isolated muscles, simulating an organic lesion, and in Ganser's syndrome we have a partial analogue, but it takes place in the association apparatus, it is a partial memory disorder, a disorder of the superior logical mechanism. The question of simulation in medico-legal cases, where random replies are given in an otherwise connected production, is also of special importance.

Description of the Brains and Spinal Cords of Two Brothers. Dead of Hereditary Ataxia. (Cases XVIII and XX of the series in the family described by Dr. Sanger Brown with a Clinical Introduction by Dr. Sanger Brown.) By LEWELLYS F. BARKER. Decennial Publications of the University of Chicago, 1903.

The clinical report of the series was first published in 1892, and two of the histories are here reproduced in detail with the symptoms that have since appeared. In addition, a short résumé of the symptomatology of the disease is given. The anatomical findings, especially the description of the convolutions and sulci of the two brains, are given in great detail, not only on account of the rarity of the condition, but as the cases afforded an excellent opportunity for the topographical comparison of the brains of two brothers. The summary of these two cases shows the brains and cords to have been relatively small, the cerebral cortex was well fissured and showed no deviations from the normal type. In the cord, measurements showed an abnormal ratio between the areas of gray and white matter, as revealed in cross sections. There was a marked degeneration of the gray and white matter of the spinal cord, medulla and cerebellum and involved chiefly the cells and fibres of the centripetal paths. In the cord, there was an increase in glia tissue. It is hoped in a future paper to enter more fully into a discussion of the relation of the lesions to the clinical symptoms. The paper is illustrated with twelve plates, comprising in all forty-six figures of great typographical excellence.